

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Ingo Koch

Title: METHOD FOR
DETERMINING THE
AMOUNT OF CHARGE
WHICH CAN BE DRAWN
FROM A STORAGE
BATTERY AND
MONITORING DEVICE

Appl. No.: To be determined

Filing Date: 07-11-2003

Examiner: To be determined

Art Unit: To be determined

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.	
<u>EV 227045712 US</u>	<u>July 11, 2003</u>
(Express Mail Label Number)	(Date of Deposit)
<u>Andrea Albers</u>	
(Printed Name)	
<u><i>Andrea Albers</i></u>	
(Signature)	

17537 U.S. PTO
10/617535
07/11/03

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

UTILITY PATENT APPLICATION TRANSMITTAL

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Ingo Koch
Joppnerweg 7
D-31789 Hameln
Germany

☐ Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

☒ Specification, Claim(s), and Abstract (22 pages).

☒ Informal drawings (2 sheets, Figures 1-4).

☒ Form PTO-1449 with copies of 6 listed reference(s).

☒ Application Data Sheet (37 CFR 1.76) (3 pgs).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$750.00	\$750.00
Total Claims:	25	- 20	= 5	x \$18.00	= \$90.00
Independents:	2	- 3	= 0	x \$84.00	= \$0.00
If any Multiple Dependent Claim(s) present:				+ \$280.00	= \$0.00
				SUBTOTAL:	= \$840.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):					= \$0.00
				TOTAL FILING FEE:	= \$840.00

☒ A check in the amount of \$840.00 to cover the filing fee is enclosed.

☐ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 7-11-03

By 

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